STD. 262 (	(REV. 10/92)	PENSE CLAIN	VI	,			nd Privac erse Side				Door	_ 1	of	U
CLAIMANT'S NAME						SSAN OR EMPLOYEE NUMBER DEPART					Page		of	
Anasta	sia Carne	у		CB/ID NUMB	FD	Dr. (ISIO)								
Director of Scheduling						DIVISION OR BUREAU					1-20	INDEX NUM	BER	
RESIDENCE ADDRESS						Office of the First Lady HEADQUARTERS ADDRESS						TELEPHON	MIMBER	
						State Ca	apitol, Fi	rst Floor			1	TELEPHON	NUMBER	
					10,510	CITY				STATE			ZIP	
						Sacramento				CA			95814	
LOCATION			MEALS		Γ		TF		RANSPORTATION					
Apr-09		LOCATION WHERE EXPENSES	LODGING							CARFARE,			BUSINESS	TOTAL
DATE	TE TIME	WERE INCURRED	Lobolito	BREAKFAST	LUNCH	DINNER	INCIDENTALS	COST OF TRANS.	TYPE USED	TOLLS,		E CAR USE	EXPENSE	- Linde
			~					/	TIPE OSED	PARKING	MILES	AMOUNT		FOR DAY
7-Apr	8:15 AM	SAC-SD	82.74					144.60	flight		12 21	9.35		236.6
8-Apr	6 pm	SD-SAC			3.36		6.00	144.60		18.00	12	15.35	500	101.7
14-Apr	11:30 AM	SAC-OC	47.51					1		~	1	, C.C. Mary		181.3
14-Api	11.50 744	3AC-0C	47.31	/		18.00	4.7	114.60	flight	18.00	-			203.0
15-Apr	5:30 pm	OC-SAC		4.27	3.25		6.00	114.60	·		12/21	9.35	and the second	137.4
								3					i	
												0.00		0.0
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			**									0.00		0.00
												0.00		0.00
	SUBTOTALS 130.25		4.27	6.61	18.00	12.00	518.40	0.00	36.00	74	32.93	0.00		
COLUMN	CODE (A	CCTG. USE ONLY	)	A TRACT	5. 混造		Y YEAR					ilke za	0.00	
	CLAIM	TOTAL								7744	0 42	3	07.50	46
PURPOSI	E OF TRIF	P, REMARKS AND	DETAILS	(Attach re	ceipts wh	en require	·d)					<u> </u>	<u>\$758</u>	.40
		or Governor's W						ize event	site and		NORMAL W	ORK HOU	RS	
		Resource Fair da					,		- Site and	·	PRIVATE V	EUICI E IIIC	ENCE NUM	1050
1/14-4/1:	5: Prepar	e for launch of Fi	irst Lady'	s WE Co	nnect Ne	eighborh	ood Cente	er - orga	nize	ľ	NVAILV	ETHOLE LIC	ENSE NUI	NREK
		et up and lead co								1	MILEAGE R	ATE CLAIM	ED.	
											0.445	AL OLAN	LU	22
485										Г	AGENC	Y ACCOU	NTING OF	FICE
HEREBY C	ERTIFY, That	the above is a true state	ment of the tra	ivel expenses	incurred by	me in accord	ance with DP	A rules in the	e service of th	e State of		USE O		
California. If	a privately ov	vned vehicle was used an	id if mileage e	xceeds the m	ınimum rate.	I certify the c	ost of the ope	erating the ve	ehicle was eq	ual to or	PAID BY R	EVOLVING FU		MBER
reater than t	lhe rate claim	ed, and that I have met th	e requiremen	ls as prescrib	ed by SAM S	Sections 0750	, 0751,0752,	0753 and 07	54		21	10.11	100	
	vehicle safety	and seal belt usage.		T.	ATE						C/ C	104	90	
				D	ATE /	į	CNATURE OF	0551055				DA	TE	
				6	1173/	09							4.7.	3-09
G					15/							100	TE /	
			0.000	,	*									
													1/28	109